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Statement of

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Marine Casualty Services

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Department of Veterans Affairs

Before the

Subcommittee on Oversight and Investigations

House Committee on Veterans Affairs

Concerning

The Efforts Being Made to Assist Military Personnel

In Making a "Seamless Transition" from

Active Duty to Veterans' Status

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NOT FOR PUBLICATION UNTIL RELEASED BY THE HOUSE COMMITTEE ON VETERANS AFFAIRS Mr. Chairman, Congressman Strickland, and distinguished members of the Subcommittee, I am grateful for this opportunity to appear before you today to discuss my experience as the Officer in Charge of Marine Casualty Services at the National Naval Medical Center (NNMC), and to present my perspective on how we can best support our wounded Warriors and their families as they transition from military hospitals to VA Medical Centers, and, in most cases, ultimately from active duty to veterans status.

The U.S. Marine Corps continues to be highly focused on caring for our injured Marines and sailors and ensuring that their family members are provided for and comforted in the wake of their injury. Supporting injured Marines and their families is a complex task, as their specific needs vary from case to case. We do our best to tailor our support to fit their individual needs and those of their families, showing flexibility wherever and whenever possible. From notification of an injury, to bringing families to bedside, to providing amenities in hospital rooms, and assisting with their transition back to full duty or to veteran's status, the Marine Corps continuously evaluates its processes and makes adjustments where necessary to see that the appropriate level of support is provided. While we have encountered problems, we are actively collecting lessons learned and incorporating needed changes.

I thank the committee for this opportunity to participate in this effort to create a seamless support system for wounded service members and their families as they transition to civilian life.

Establishment of Marine Casualty Services

As Marines, we take pride in taking care of our own. Based on lessons learned from

the treatment and processing of Marines and Sailors injured during Operation Enduring Freedom and the initial military action in Iraq, the decision was made to establish a Marine Casualty Services Branch at NNMC, under the leadership of a Senior Marine Officer. It became apparent early on that there were many pieces to the casualty care puzzle, and in order to maintain and guarantee visibility of our Marines and Sailors, we needed to improve our internal and external cross-functional coordination. To meet these emerging requirements, we established additional teams at Andrews Air Force Base to meet all incoming medevac flights, a team at Walter Reed to provide on site support for Marines receiving amputee rehabilitation, and personnel augmentation to the Joint Personnel Effects Division at Aberdeen. It was clear that we were going to have to remain actively involved with both day to day care, and time and staff permitting, do our best to continue to support and advocate for our Marines and families once they were transferred to a VA Medical Center in order to ensure that they received the high level of care and attention they did while hospitalized at NNMC.

Facing New Challenges

Outlined below are some of the reasons why the returning casualties were presenting a challenge to both the Military and VA treatment facilities. These factors not only lead to the expansion of Marine Casualty Services' role, but also to the implementation of new programs and initiatives by the Naval Hospital Commander intended to broaden coordination of care and family support.

- Multiple severe and complex injuries.
- Lengthy and intensive recovery and rehabilitation period.

- Comprehensive discharge planning requiring coordination and collaboration between numerous agencies.
- Need for extensive case management.
- High level of attention and support required by the family members.
- High profile patients (anxious families, media and National interest, VIP visitors, every patient with direct line to the Commander).

Marine and Family Support

Casualty care requires extensive planning and coordination. The Marines at Bethesda took pride in providing what I refer to as the "Lexus" level of assistance and support in keeping with our long standing tradition of taking care of own. Upon arrival, we immediately embraced the families, and recognized that their participation was essential to the morale and recovery of our injured Marines and Sailors. Our injured and their families knew that we were there for them 24 hours a day, and would do whatever it took to address any concerns, and reduce the emotional strain and uncertainty associated with the medical treatment process and unexpected traumatic injury.

In one particularly difficult case, a father who was so inspired by the efforts of the Marine Casualty Services Branch on his son's behalf, asked if it was possible for a parent to become an honorary Marine. The important lesson that we learned from these experiences was that it was not a matter of being perfect and having the solution to every problem—it was simply a matter of being there. By maintaining a professional, yet caring and compassionate relationship with our injured and their families, we were able to uphold the special trust and confidence afforded us during a very confusing and vulnerable time, earning their admiration and elevating their expectations.

Preparing our Injured Marines and Sailors for Transfer to the VA

In an attempt to better prepare our injured Marines and their families for the next phase of their treatment and rehabilitation within the VA, and in order to gain a greater appreciation for some of the challenges they might face, we conducted a mutually beneficial site visit to the McGuire VA Medical Center in Richmond. The visit gave us insight into how we could better prepare them for a successful transition to the VA, by managing their expectations and helping them adapt to this new environment. Areas of discussion included VA procedures for receiving Marines to the medical center, management of psychosocial needs of the Marine and families, and the rehabilitation process. This meeting helped us to understand that the acute care provided at the MTF and the programmatic rehabilitation provided at the VA Medical Centers require different approaches. This meeting also helped the VA staff better understand the family expectations, as well as what the Marine Corps expected in the way of continued care and support for both our injured Marines and their families.

The injured are transferred to VA facilities because they require rehabilitation in a variety of areas. The Marine's cognitive and motor skills must first be evaluated before a rehabilitation plan can be put in place. In order for the medical team to get a fair assessment of the Marine's true condition, they typically reduce the level of narcotics to a tolerable point. Along with narcotics reduction, the staff was very clear about defining treatment and rehab expectations with the express purpose of getting that Marine to a level of functionality which would allow him or her to reintegrate into the community while remaining as independent as possible. It was disconcerting to the families to see

their injured Marine in pain. Simple explanations from the doctors or therapists have helped to calm the families' fears.

The staff understood the importance of having the family present, but because the goals for treatment are different, the VA Medical Center must strictly adhere to the visitation policy. Additionally, after the first week of therapy, and keeping in line with their goal to make the Marine independent, family members are discouraged from visiting the Marine during therapy. This was upsetting to many family members because at NNMC they had round the clock access to their injured Marine, but VA is working to ensure that families understand the importance of protocols during this stage of recovery.

VA Addresses Family Needs

As a result of this meeting and previous experiences, the McGuire staff acknowledged that by addressing some of the many psychosocial needs of the family they could begin to establish a rapport that would prove beneficial to the Marine's recovery. VA Medical Centers are continually making adjustments to better serve the families which include establishing support groups, initiating plans for Fisher Houses, and having doctors and staff more available to speak with the Marine and family. We have all found that increased communication, education, and comprehensive discharge planning between Marine Casualty Services, the MTF and VA staffs can ensure that our injured and their families experience a smoother transition into this next phase of their care.

Marine for Life – Injured Support

The Marine Corps has a long history of caring for its fallen and injured Marines. The many Marines and Sailors who have suffered extremely serious combat injuries would not have survived in previous wars. Due to magnificent medical care, they are

fortunately still with us. Nevertheless, their trauma still has a potentially devastating impact on them, their families and their future.

Marine for Life – Injured Support is a formal program instituted by our Commandant to assist injured Marines, Sailors who served with Marines, and their families. The concept of Injured Support gives renewed meaning to "Once a Marine, Always a Marine" and assures all Marines that they never truly leave the Corps. The goal of this program is to bridge the difficult gap between military medical care and handoff to the Department of Veterans Affairs. The key is to ensure continuity of support through transition, provide assistance for however long it might take, and in combination with OSD's Military Severely Injured Joint Support Operations Center, provide case management tracking for several years afterwards. As our injured Marines continue with their recovery, potential transfer from active to veteran status, and assimilation back into their communities, Injured Support will be their greatest supporter and advocate.

This program has been in operation since January of this year with features that include advocacy within both the Department of Defense and external agencies, assistance with military disability processing and physical evaluation boards, assistance with employment, and improved Department of Veterans Affairs handling of Marine/Sailor cases. Injured Support representatives interact with Marine Casualty Services on a weekly basis to provide program information and contact numbers to hospitalized Marines and family members. Marine for Life – Injured Support is living proof of our motto -- "Semper Fidelis."

Importance of Case Management

Intensive case management is a key component for post discharge and follow-up care.

Continued communication and coordination between the MTF Case Manager,

VHA /DoD Liaison, VA Medical Center OEF/OIF Case Manager, and the Military

Service Representative (in the Marine Corps this would be Marine for Life – Injured

Support), is absolutely crucial as our injured proceed through their recovery. Without it,

there is a greater chance they will somehow get lost in the system.

DoD-VA Partnership

Both DoD and the VA have placed the highest priority on the care and services being provided to injured service members. At NNMC, the onsite VA social worker and benefits counselor are integral members of the multidisciplinary team. They collaborate with the hospital staff, Marine Casualty Services personnel, family members, and VA Medical Center staff on a daily basis in order to ensure a seamless transition of care and services. The VA has recognized that our wounded Marines and Sailors differ from their traditional rehabilitation patient in age and extent or complexity of injury. To enhance continuity, clinical outcomes, and improve family support, the trauma team doctors at NNMC conduct weekly teleconferences with primary VA transfer sites, such as the VA Medical Centers in Richmond and Tampa. Additionally both NNMC and VA have conducted site visits within the last six months.

VA Poly-Trauma Conference

In February 2005, the VA Employee Education System in collaboration with the Office of the Deputy Under Secretary for Health hosted a program "VHA Poly-Trauma Lead Centers Conference" in Washington, DC. Over 30 senior health executives

from the four VA Poly-Trauma Centers participated in this conference, along with medical and non-medical personnel from Walter Reed Army Medical Center, National Naval Medical Center, and Marine Casualty Services. The purpose of this conference was to give VA personnel a better understanding of how the two major MTFs in the National Capital Region take care of the injured and their families, so that they could build and institute a better treatment and support plan for the numerous service men and women admitted to their facilities. Most of the concerns centered on communication, coordination of care, and family support. This conference proved very beneficial to all participants in providing a way ahead to better facilitate the transition from the MTF to the VA.

The Commandant Reaffirms Corps' Commitment to Injured Marines

Severe injury has a traumatic impact on our Marines and their families, in that not only are life and death at stake, but there are also significant disruptions to family systems for months and years to come. They will find themselves navigating new territory and facing possibly some of the greatest challenges of their lives. Without a doubt, taking care of our wounded Marines, Sailors and their families is one of the Commandant's top priorities. He wants to make sure that our Marines can access their VA health care and benefits without complication and unnecessary delay. Additionally, his hope for our Marines is that they get the information, link to services and resources, and assistance they need to be self-sufficient, contributing members of their communities. His level of dedication to these Marines is evidenced by the placement of a Senior Marine Officer as Marine Liaison in the Department of Veterans Affairs' Office of Seamless Transition.

Conclusion

On behalf of all the selfless, dedicated men and women who serve in our Armed Forces, I thank this Committee for your continued support during these demanding times. The Department of Defense, Department of Veterans Affairs, and all of the individual services are committed to keeping the treatment, recovery and transition of our injured as their highest priority. As challenges arise, they will be addressed and resolved, and best practices will be instituted as they are developed. We must continue to partner and communicate to ensure the transition process is a positive one, helping our veterans to face this next phase of their lives with optimism and confidence.

Again, I thank the committee for your unwavering support.